Attorney Docket: 3040/2 page 1 of 2

Combined Declaration For Patent Application and Power of Attorney

As a below named inve My residence, I I balieve I am	cost office and	fress and citize	enship are as sta	nted below next to	my nam	;		
invention entitled Secu	re purchasing	over the Inte		one name is list hich claimed ar cation of which	d below) nd for wh	or an original, ich a patent is s	first and joint ought on the	
(check one) is at	tached hereto							
☐ was	filed on	_ as Application	on Serial No	and was an	nended a	n .1 herel	ov state that I	
amendment referred to	above.	ontents of the	ADOVE IDENTIFIE	specification, inc	luding the	e claims, as ame	ended by any	
				terial to the patent				
patent or inventor's cer certificate having filing of				ed States Code. d below any forei nority is claimed:	g 119 of gn ap plic	any foreign application for patent	lication(s) for or inventor's	
	Prior Foreign Application(s)					Priority Claimed		
((Number)	(Country)	(Day, Mor	th, Year Filed)				
(Number)	(Country)	(Day, Mor	th, Year Filed)		-		
(Number)	(Country)	(Day, Mon	th, Year Filed)	Yes	No		
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States Application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:								
	(Application Serial No.)			(Filing Date) Status (patented, pending, abandoned)				
((Filing Date)	Status (patented, pending, abandoned)						
I hereby appoi prosecute this applicat	nt the follow tion and to tra	ing attorneys ansact all bus	s, with full pow siness in the P	er of substitution	n, assoc nark Offi	iation, and revice connected t	ocation, to herewith.	
		ark M. Fried		ation No. 33,88;				
Address all Correspond	lence to:							
DR. MAI	RK FRIEDM	AN LTD.	i Direc	t all telephone o	alle & fa			
C/O BILL POLKINGHORN				Direct all telephone calls & faxes to: BILL POLKINGHORN				
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9003 FL UPPER	!	Fax 0013019529023						
			*					

FULL NAME OF SEVENTH INVENTOR

RESIDENCE

POST OFFICE ADDRESS

Continuation of Combined Declaration For Patent Application and Power of Attorney

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be tru; and further that these exatements were made with the knowledge that withful false statements and the like so made are punishable by fine or improvement, or both, under Section 1001 of Tille 18 of the United States Code and that such willful false statement may jeopardize the validity of the application of any patent issued thereon. *FULL NAME OF SOLE OR FIRST INVENTOR INVENTOR'S SIGNATURE Yigal Evroni RESIDENCE CITIZENSH 11 Rambam St., Herzelia 46401, Israel Israeli POST OFFICE ADDRESS 11 Rambam St., Herzelia 46401, Israel FULL NAME OF SECOND INVENTOR INVENTOR'S SIGNATURE Avi Berediik RESIDENCE CITIZENSH 4 Ein Gedi St., Glvataim, 53307 Israel Israeli POST OFFICE ADDRESS 4 Ein Gedi St., Givataim, 53307 Israel FULL NAME OF THIRD INVENTOR INVENTOR'S SIGNATURE Ronen Juster RESIDENCE CITIZENSHI 26 Hagiva'a St., Savion, Israel Israeli POST OFFICE ADDRESS 26 Hagiva'a St., Savion, Israel FULL NAME OF FOURTH INVENTOR INVENTOR'S SIGNATURE DATE RESIDENCE CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF FIFTH INVENTOR INVENTOR'S SIGNATURE DATE RESIDENCE CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF SIXTH INVENTOR INVENTOR'S SIGNATURE DATE RESIDENCE CITIZENSHIP POST OFFICE ADDRESS

INVENTOR'S SIGNATURE

DATE

CITIZENSHIP